

CANDIDATE'S REPORT

(To be filed by a candidate or his principal campaign committee)

1. Qualifying Name and Address of Candidate

Johnny Blount
102 Mitchell Drive
Hammond, LA 70401

2. Office Sought (Include title or office as well as parish, city, town or election district.)

Tangipahoa Parish
City of Hammond
Councilman District 1

OFFICE USE ONLY

1910
10-P
9/2

1
1
0
0
0
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0

3. Date of Primary October 2, 2010This report covers from January 2010 through September 2010

4. Type of Report:

- 180th day prior to primary 40th day after general
 90th day prior to primary Annual (future election)
 30th day prior to primary Supplemental (past election)
 10th day prior to primary
 10th day prior to general Amendment to prior report

5. FINAL REPORT IS:

- Withdrawn Filed after the election AND all loans and debts paid
 Unopposed

6. Name and Address of Financial Institution
(You are required by law to use one or more banks, savings and loan associations, or money market mutual fund as the depository of all campaign funds.)

Florida Parish Bank
1300 W. Morris St.
Hammond, LA 70401

7. Full Name and Address of Treasurer

None

8. Name of Person Preparing Report Larry Francis, Sr.Daytime Telephone 886-277-5827

10. WE HEREBY CERTIFY that the information contained in this report and the attached schedules is true and correct to the best of our knowledge, information and belief, and that no expenditures have been made nor contributions received that have not been reported herein, and that no information required to be reported by the Louisiana Campaign Finance Disclosure Act has been deliberately omitted.

This 12 day of September 2011

Johnny Blount

Signature of Candidate/Chairperson
(To be signed by Chairperson only if report by principal campaign committee)

Daytime Telephone _____

8. FOR PRINCIPAL CAMPAIGN COMMITTEES ONLY

9. Name and address of principal campaign committee, committee's chairperson, and subsidiary committees, if any (use additional sheets if necessary).

Preparer: Larry Francis, Sr.

Signature of Treasurer

Form 402, Rev. 1/88. Page Rev. 3/88

886-277-5825

Daytime Telephone _____